

Fill in this information to identify the case:

Debtor name Katera's Kove, Inc.

United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA

Case number (if known) 16-23084

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on September 2, 2016

X /s/ Lynn Katekovich

Signature of individual signing on behalf of debtor

Lynn Katekovich

Printed name

CEO/President

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Katera's Kove, Inc.

United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA

Case number (if known) 16-23084

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Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ <u>0.00</u>
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ <u>111,062.54</u>
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ <u>111,062.54</u>

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ <u>2,066,090.19</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ <u>395,598.41</u>
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ <u>1,295,726.95</u>
4. Total liabilities Lines 2 + 3a + 3b	\$ <u>3,757,415.55</u>

Fill in this information to identify the case:Debtor name Katera's Kove, Inc.United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIACase number (if known) 16-23084☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****2. Cash on hand****\$110.00****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Citizen's BankChecking9453\$10,000.003.2. Home Savingssavings9595\$370.54**4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$10,480.54**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

Debtor Katera's Kove, Inc.

Case number (If known) 16-23084

Name

11. Accounts receivable

11a. 90 days old or less:

15,000.00

-

0.00

=

\$15,000.00

face amount

doubtful or uncollectible accounts

11b. Over 90 days old:

45,000.00

-

0.00

=....

\$45,000.00

face amount

doubtful or uncollectible accounts

12. Total of Part 3.

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$60,000.00

Part 4: Investments

13. Does the debtor own any investments?

☒ No. Go to Part 5.
 ☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

☒ No. Go to Part 6.
 ☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

☒ No. Go to Part 7.
 ☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

☐ No. Go to Part 8.
 ☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture furniture is 10 years older or older	Unknown	N/A	\$2,500.00
40. Office fixtures			
41. Office equipment, including all computer equipment and communication systems equipment and software computers not leased are 10 years of age or older	Unknown	N/A	\$2,000.00
42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			

Debtor Katera's Kove, Inc. Case number (If known) 16-23084
Name

43. **Total of Part 7.** \$4,500.00
Add lines 39 through 42. Copy the total to line 86.
44. **Is a depreciation schedule available for any of the property listed in Part 7?**
☒ No
☐ Yes
45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**
☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
☒ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1. <u>2003 GMC Sierra - not running</u>	<u>Unknown</u>		<u>\$300.00</u>
47.2. <u>2011 Ford F-150 truck</u>	<u>Unknown</u>	<u>trade-in</u>	<u>\$17,175.00</u>
47.3. <u>2012 Ford Explorer</u>	<u>Unknown</u>		<u>\$18,607.00</u>

48. **Watercraft, trailers, motors, and related accessories** *Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels*

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

51. **Total of Part 8.** \$36,082.00
Add lines 47 through 50. Copy the total to line 87.

52. **Is a depreciation schedule available for any of the property listed in Part 8?**
☒ No
☐ Yes
53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**
☒ No
☐ Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☒ No. Go to Part 10.
☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

Official Form 206A/B Schedule A/B Assets - Real and Personal Property

Debtor Katera's Kove, Inc. Case number (If known) 16-23084
Name

- ☐ No. Go to Part 11.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks, and trade secrets			
61.	Internet domain names and websites a website at <u>www.kateraskove.com</u> is maintained	Unknown		Unknown
62.	Licenses, franchises, and royalties license to operate from Commonwealth of Pennsylvania	Unknown		Unknown
63.	Customer lists, mailing lists, or other compilations no customer lists are maintained in that all services are provided in-house	Unknown		Unknown
64.	Other intangibles, or intellectual property			
65.	Goodwill			
66.	Total of Part 10. Add lines 60 through 65. Copy the total to line 89.			\$0.00
67.	Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
68.	Is there an amortization or other similar schedule available for any of the property listed in Part 10? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
69.	Has any of the property listed in Part 10 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?
Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.
☐ Yes Fill in the information below.

Debtor **Katera's Kove, Inc.**

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Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$10,480.54	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$60,000.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$4,500.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$36,082.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$0.00	
91. Total. Add lines 80 through 90 for each column	\$111,062.54	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$111,062.54

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United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA

Case number (if known) 16-23084

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	Corporation Service Company Creditor's Name PO Box 2576 UCCSPREP@cscinfo.com Springfield, IL 62708 Creditor's mailing address UCCSPREP@cscinfo.com Creditor's email address, if known Date debt was incurred 12/5/2014 Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien Describe the lien UCC 1 - 2014120501767 Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00

2.2	Corporation Service Company Creditor's Name PO Box 2576 UCCSPREP@cscinfo.com Springfield, IL 62708 Creditor's mailing address Creditor's email address, if known Date debt was incurred 05/11/2015 Last 4 digits of account number Do multiple creditors have an interest in the same property?	Describe debtor's property that is subject to a lien Describe the lien UCC 1 - 2015051101539 Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply	Unknown	\$0.00
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Debtor **Katera's Kove, Inc.**

Case number (if know)

16-23084

Name

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.☐ Contingent☐ Unliquidated☐ Disputed

2.3

Corporation Service Company

Creditor's Name

PO Box 2576**UCCSPREP@cscinfo.com****Springfield, IL 62708**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred**05/15/2015****Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

Unknown**\$0.00**

Describe the lien

UCC 1 - 2-15051502224

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)**As of the petition filing date, the claim is:**

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

2.4

Elm Services

Creditor's Name

PO Box 15270**Irvine, CA 92623-5270**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred**7/10/2015****Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

Unknown**\$0.00**

Describe the lien

UCC 1 - 2015071002242

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)**As of the petition filing date, the claim is:**

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

2.5

Ford Credit

Creditor's Name

Box 220564**Pittsburgh, PA 15257-2564**

Creditor's mailing address

Describe debtor's property that is subject to a lien

\$12,728.59**\$17,175.00****2011 Ford F-150 truck**

Describe the lien

encumbered vehicle title

Is the creditor an insider or related party?

☒ No

Debtor **Katera's Kove, Inc.**

Case number (if know)

16-23084

Name

Creditor's email address, if known

Date debt was incurred

4092

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.6 Ford Credit**

Creditor's Name

Box 220564**Pittsburgh, PA 15257-2564**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

7/2015

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

2012 Ford Explorer**\$30,784.05****\$18,607.00**

Describe the lien

encumbrance on vehicle title

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.7 Padco Financial Services, Inc.**

Creditor's Name

1328 Main Street**Crete, IL 60417**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

11/7/2012

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

cameras and software systems**\$37,577.55****Unknown**

Describe the lien

UCC filings

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☒ Unliquidated☐ Disputed

Debtor **Katera's Kove, Inc.**
Name

Case number (if know) **16-23084**

2.8

**The Home Savings And
Loan Co. & ISAOA**

Creditor's Name

**3690 Orange Place, Suite
210**

Beachwood, OH 44122

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

1/18/2011

Last 4 digits of account number

5006

Do multiple creditors have an
interest in the same property?

☒ No

☐ Yes. Specify each creditor,
including this creditor and its relative
priority.

Describe debtor's property that is subject to a lien
**security interest in assets pledged on loan
guaranteed by the SBA**

\$1,985,000.00

Unknown

Describe the lien

UUC 1 filing -2010102702220

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

2.9 **VCE Enterprises**

Creditor's Name

PO Box 83

Rockland, MA 02370

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

02/23/2012

Last 4 digits of account number

Do multiple creditors have an
interest in the same property?

☒ No

☐ Yes. Specify each creditor,
including this creditor and its relative
priority.

Describe debtor's property that is subject to a lien

Unknown

\$0.00

Describe the lien

UUC 1 - 2012022306316

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$2,066,090.1
9**

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did
you enter the related creditor?

Last 4 digits of
account number for
this entity

Ford Motor Credit Company LLC

PO Box 62180

Colorado Springs, CO 80962

Line **2.5**

Debtor **Katera's Kove, Inc.**

Name

Case number (if know)

16-23084

**Home Savings and Loan
250 East Wilson Bridge Road
Suite 150
Columbus, OH 43085**

Line **2.8**

**Weltman, Weinberg & Reis Co., LPA
436 Seventh Avenue
Suite 2500
Pittsburgh, PA 15219**

Line **2.5**

Fill in this information to identify the case:Debtor name **Katera's Kove, Inc.**United States Bankruptcy Court for the: **WESTERN DISTRICT OF PENNSYLVANIA**Case number (if known) **16-23084**☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).☐ No. Go to Part 2.☒ Yes. Go to line 2.**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred 2013 to present	Basis for the claim: income and withholding taxes		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address PA Department of Labor & Industry 16th Fl., L&I Bldg. Harrisburg, PA 17121	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$7,598.41	\$7,598.41
	Date or dates debt was incurred 2016 and earlier	Basis for the claim: lien secured by judgment		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Katera's Kove, Inc. Name	Case number (if known)	16-23084
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2.3	Priority creditor's name and mailing address Pennsylvania Department of Revenue Department 280946 Harrisburg, PA 17128-0946	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$188,000.00	\$188,000.00
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Date or dates debt was incurred 8/2015 to present	Basis for the claim: Unemployment taxes
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Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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2.4	Priority creditor's name and mailing address Pennsylvania Department of Revenue Department 280946 Harrisburg, PA 17128-0946	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$200,000.00	\$200,000.00
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Date or dates debt was incurred 8/2015 to present	Basis for the claim: payroll withholding taxes
---	--

Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim	
--	--	--	------------------------	--

3.1	Nonpriority creditor's name and mailing address A Place For Mom PO Box 674164 Detroit, MI 48267 Date(s) debt was incurred <u>2016 and earlier</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,640.02	
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3.2	Nonpriority creditor's name and mailing address Adecco Group North America c/o Amato, Keating and Lessa, P.C. 107 North Commerce Way, Suite 100 Bethlehem, PA 18017-8930 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u>2261</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,145.51	
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3.3	Nonpriority creditor's name and mailing address Allen Andrascik, Esquire 2601 Darlington Road PO Box 1555 Beaver Falls, PA 15010 Date(s) debt was incurred <u>2016 and earlier</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>attorney fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,812.50	
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Debtor **Katera's Kove, Inc.**
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3.4	Nonpriority creditor's name and mailing address Alliance Laundry Systems, LLC PO Box 990, Shepard Street Ripon, WI 54971 Date(s) debt was incurred <u>11/15/2013</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>lease of laundry equipment with UCC filing</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,394.80
3.5	Nonpriority creditor's name and mailing address Armstrong Cable 437 North Main Street Butler, PA 16001 Date(s) debt was incurred <u>2016 and earlier</u> Last 4 digits of account number <u>6701</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>cable service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,637.40
3.6	Nonpriority creditor's name and mailing address Ascentium-2145394, 2154774 and 2155701 PO Box 304593 Dallas, TX 75303-1593 Date(s) debt was incurred <u>2016 and earlier</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>installment purchases of equipment used in business</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$335,292.02
3.7	Nonpriority creditor's name and mailing address Balboa Capital 2010 Main Street Irvine, CA 92614 Date(s) debt was incurred <u>7/2015</u> Last 4 digits of account number <u>5001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>lease of cameras and other equipment in business</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$53,776.04
3.8	Nonpriority creditor's name and mailing address Beaver Falls Municipal PO Box 400 Beaver Falls, PA 15010-0400 Date(s) debt was incurred <u>2016 and earlier</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,471.86
3.9	Nonpriority creditor's name and mailing address Beaver Falls Municipal Water Authority PO Box 400 Beaver Falls, PA 15010 Date(s) debt was incurred <u>2016 and earlier</u> Last 4 digits of account number <u>181</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,624.14
3.10	Nonpriority creditor's name and mailing address Beaver Falls Municipal Water Authority PO Box 400 Beaver Falls, PA 15010 Date(s) debt was incurred <u>2016 and earlier</u> Last 4 digits of account number <u>100</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>fire hydrant service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,150.86

Debtor **Katera's Kove, Inc.**
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3.11	Nonpriority creditor's name and mailing address Beaver Valley Federal Credit Union 601 37th Street Beaver Falls, PA 15010 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>payroll checks that were cashed but not cleared</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$832.04
3.12	Nonpriority creditor's name and mailing address Can Capital 2015 Vaughn Road, NW, Ste 500 Kennesaw, GA 30144 Date(s) debt was incurred <u>10/19/2012</u> Last 4 digits of account number <u>9197</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>lease of business property</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,909.14
3.13	Nonpriority creditor's name and mailing address Cottrill Arbutina & Associates 525 Third Street Beaver, PA 15009 Date(s) debt was incurred <u>2011 and 2012</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>accounting services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,072.32
3.14	Nonpriority creditor's name and mailing address Elizabeth Butera 659 3rd Street Beaver, PA 15009 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>lawsuit by Medical Staffing Associates, Inc.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$180,000.00
3.15	Nonpriority creditor's name and mailing address Fast Check FMLLC 1215 East Washington Street New Castle, PA 16101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>for cashed payroll checks</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,663.00
3.16	Nonpriority creditor's name and mailing address Giant Eagle Inc. c/o Encircle Collections, Inc 7713 NW 46th Street Miami, FL 33166 Date(s) debt was incurred <u>3670</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>checks that did not clear</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$307.47
3.17	Nonpriority creditor's name and mailing address Great American PO Box 660831 Dallas, TX 75266-0831 Date(s) debt was incurred <u>2016 and earlier</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>lease of Kyocera Ecosys FS-6530 MFP Copier System</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$878.70

Debtor **Katera's Kove, Inc.**
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3.18	Nonpriority creditor's name and mailing address Guardian Security 174 Thorn Hill Road Warrendale, PA 15086 Date(s) debt was incurred <u>2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>installation and maintenance of security system</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,900.00
3.19	Nonpriority creditor's name and mailing address Guardian Securitiy Date(s) debt was incurred <u>2016 and earlier</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,573.07
3.20	Nonpriority creditor's name and mailing address James Maccaglia 227 Old Farm Road Cranberry Twp, PA 16066 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>loans to debtor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.21	Nonpriority creditor's name and mailing address Laurel Linen Service Inc. 1509 Parkway View Drive Pittsburgh, PA 15205 Date(s) debt was incurred <u>prior to 2016</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$155,312.26
3.22	Nonpriority creditor's name and mailing address LCA PO Box 1297 Troy, MI 48099-1297 Date(s) debt was incurred <u>6/15/2015</u> Last 4 digits of account number <u>5001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>lease of cameras and related equipment, payments due since 2/15/2016 total \$907.03</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,223.17
3.23	Nonpriority creditor's name and mailing address Lease Corporation of America 3150 Livernois Road Suite 300 Troy, MI 48083 Date(s) debt was incurred <u>6/15/2015</u> Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt supported by UCC filing</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.24	Nonpriority creditor's name and mailing address Lincoln Automotive Financial Services PO Box 62180 Colorado Springs, CO 80962-4400 Date(s) debt was incurred <u>2/9/2015</u> Last 4 digits of account number <u>9423</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>lease of a 2014 Lincoln Sedan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,599.82

Debtor	Name	Case number (if known)	16-23084
3.25	Nonpriority creditor's name and mailing address Marlin Business Bank 2795 East Cottonwood Parkway Salt Lake City, UT 84121 Date(s) debt was incurred <u>5/11/2015</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>leases of business equipment supported by 3 UCC filings that have been terminated</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$125,623.80
3.26	Nonpriority creditor's name and mailing address Marlin- 1, 2, 3 & 4 PO Box 13604 Philadelphia, PA 19101-3604 Date(s) debt was incurred <u>8/15/2012</u> Last 4 digits of account number <u>7708</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>leases of equipment used in business: paging system, office furniture, 2 way radios and laptops that have been terminated</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,093.73
3.27	Nonpriority creditor's name and mailing address Medical Staffing Associates, Inc. 659 3rd Street Beaver, PA 15009 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>lawsuit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$180,000.00
3.28	Nonpriority creditor's name and mailing address Michael Fives, Esquire 116976 Perry Highway Suite 1302 Wexford, PA 15090 Date(s) debt was incurred <u>2016 and earlier</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>legal fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,601.50
3.29	Nonpriority creditor's name and mailing address Neopost PO Box 30193 Tampa, FL 33630-3193 Date(s) debt was incurred <u>2016 and earlier</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$533.17
3.30	Nonpriority creditor's name and mailing address Nissan-Infinity LT PO Box 660366 Dallas, TX 75266-0366 Date(s) debt was incurred <u>6/2014</u> Last 4 digits of account number <u>0732</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>lease of 2014 Nissan automobile</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,109.19
3.31	Nonpriority creditor's name and mailing address PNC Bank PO Box 856177 Louisville, KY 40285-6177 Date(s) debt was incurred <u>2010 to present</u> Last 4 digits of account number <u>7619</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit card purchases for business</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,360.49

Debtor **Katera's Kove, Inc.**
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3.32	Nonpriority creditor's name and mailing address RAW Consulting, LLC f/k/a RAW Medical Consulting, LLC 415 40th Street Beaver Falls, PA 15010 Date(s) debt was incurred <u>2013 to present</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>claims related to loans and stock redemption agreements</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,000.00
3.33	Nonpriority creditor's name and mailing address Ruk Properties LLC 66 Progress Avenue Cranberry Twp, PA 16066 Date(s) debt was incurred <u>prior to 2016</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,534.28
3.34	Nonpriority creditor's name and mailing address Sams Club PO Box 530981 Atlanta, GA 30353 Date(s) debt was incurred <u>9/2012</u> Last 4 digits of account number <u>2757</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit card purchases for business</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,608.06
3.35	Nonpriority creditor's name and mailing address Sheetz Business Edge PO Box 6293 Carol Stream, IL 60197-6293 Date(s) debt was incurred <u>2015</u> Last 4 digits of account number <u>2069</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit card purchases for business</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,565.96
3.36	Nonpriority creditor's name and mailing address Staples Dept 51-7872296362 PO Box 689020 Des Moines, IA 50368 Date(s) debt was incurred <u>2016 and earlier</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>business supplies</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,090.48
3.37	Nonpriority creditor's name and mailing address Staples PO Box 78004 Phoenix, AZ 85062-8004 Date(s) debt was incurred <u>2016 and earlier</u> Last 4 digits of account number <u>1362</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,658.49
3.38	Nonpriority creditor's name and mailing address Time Payment 1 & 2 PO Box 3069 Woburn, MA 01888-1969 Date(s) debt was incurred <u>2016 and earlier</u> Last 4 digits of account number <u>1986</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>lease of 6 undercounter dishwashers</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$60,273.80

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3.39	Nonpriority creditor's name and mailing address Timepayment Corporation 16 New England Executive Park, Suite 200 Burlington, MA 01803 Date(s) debt was incurred <u>12/19/2014 and 5/11/2015</u> Last 4 digits of account number <u>1986</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>2 leases of dish services, dishwashers, 2 dual radio outdoor camera systems and 10 outdoor wireless cameras</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$39,054.03
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3.40	Nonpriority creditor's name and mailing address Tru Green PO Box 9001128 Louisville, KY 40290-1128 Date(s) debt was incurred <u>2016</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$167.41
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3.41	Nonpriority creditor's name and mailing address Turner Dairy 1049 Jefferson Road Pittsburgh, PA 15235-4723 Date(s) debt was incurred <u>2016 and earlier</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>goods</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,236.42
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3.42	Nonpriority creditor's name and mailing address Warren R. Butera c/o John E. Quinn, Esquir 3 Gateway Center, Suite 2325 Pittsburgh, PA 15222 Date(s) debt was incurred <u>prior to 2016</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>lawsuit filed at 2011-10548</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Bureau of Workers' Compensation Pennsylvania Dept of L & I c/o Office of Chief Counsel/BWC Division 1171 South Cameron Street Harrisburg, PA 17104-2501	Line <u>2.2</u> <input type="checkbox"/> Not listed. Explain <u> </u>	—
4.2	Gary T. Vanasdale, Esquire Suite 300, 1667 Route 228 Cranberry Twp, PA 16066	Line <u>3.33</u> <input type="checkbox"/> Not listed. Explain <u> </u>	—
4.3	George Riley Thomas II, Esquire Metz Lewis Brodman Must O'Keefe 535 Smithfield Street, Suite 800 Pittsburgh, PA 15222	Line <u>3.32</u> <input type="checkbox"/> Not listed. Explain <u> </u>	—
4.4	Justin M. Tuskan, Esquire Metz Lewis Brodman Must O'Keefe LLC 535 Smithfield Street, 8th Floor Pittsburgh, PA 15222	Line <u>3.32</u> <input type="checkbox"/> Not listed. Explain <u> </u>	—

Debtor	Katera's Kove, Inc.	Case number (if known)	16-23084
	Name		
	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.5	Noah Paul Fardo, Esq. 5541 Walnut Street Pittsburgh, PA 15232	Line 3.21 <input type="checkbox"/> Not listed. Explain _____	—
4.6	Unemployment Compensation Matters Pittsburgh & Erie Cases, Dept of L & I Office of Chief Counsel 301 Fifth Avenue, Suite 230 Pittsburgh, PA 15222	Line 2.3 <input type="checkbox"/> Not listed. Explain _____	—
4.7	Warren R. Butera c/o John E. Quinn, Esquir 3 Gateway Center, Suite 2325 Pittsburgh, PA 15222	Line 3.27 <input type="checkbox"/> Not listed. Explain _____	—

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

- 5a. Total claims from Part 1
- 5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 395,598.41
5b. +	\$ 1,295,726.95
5c.	\$ 1,691,325.36

Fill in this information to identify the case:Debtor name **Katera's Kove, Inc.**United States Bankruptcy Court for the: **WESTERN DISTRICT OF PENNSYLVANIA**Case number (if known) **16-23084**☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.**1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).*Property***2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**2.1. State what the contract or lease is for and the nature of the debtor's interest **lease of laundry equipment and system**State the term remaining **until 12/3/2018**

List the contract number of any government contract _____

**Alliance Laundry Systems, LLC
PO Box 990, Shepard Street
Ripon, WI 54971**2.2. State what the contract or lease is for and the nature of the debtor's interest **cameras**

State the term remaining _____

List the contract number of any government contract _____

**Balboa Capital
2010 Main Street
Irvine, CA 92614**2.3. State what the contract or lease is for and the nature of the debtor's interest **lease of Kyocera FS-6530 MFP copier system**

State the term remaining _____

List the contract number of any government contract _____

**Great American
PO Box 660831
Dallas, TX 75266-0831**2.4. State what the contract or lease is for and the nature of the debtor's interest **lease of cameras**

State the term remaining _____

List the contract number of any government contract _____

**LCA
PO Box 1297
Troy, MI 48099-1297**

Debtor 1 **Katera's Kove, Inc.**

First Name

Middle Name

Last Name

Case number (if known) **16-23084****Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5. State what the contract or lease is for and the nature of the debtor's interest **lease on 2014 Lincoln MKS**

State the term remaining **until 2/2017**

List the contract number of any government contract _____

**Lincoln Automotive Financial Services
Box 220564
Pittsburgh, PA 15257**

2.6. State what the contract or lease is for and the nature of the debtor's interest **lease of business location with payments equaling those owed to first mortgagee, Home Savings & Loan, on the property owned by Lynn and Michael Katekovich**

State the term remaining **until October 31, 2035**

List the contract number of any government contract _____

**Lynn and Michael Katekovich
1701 Sampson Street
Conway, PA 15027**

2.7. State what the contract or lease is for and the nature of the debtor's interest **leases for paging system, office furniture, 2 way radios and laptop computers**

State the term remaining _____

List the contract number of any government contract _____

**Marlin Business Bank
2795 East Cottonwood Parkway
Salt Lake City, UT 84121**

2.8. State what the contract or lease is for and the nature of the debtor's interest **lease on 2014 Nissan Sentra automobile**

State the term remaining **22 months**

List the contract number of any government contract _____

**Nissan Motor Acceptance Corporation
PO Box 742657
Cincinnati, OH 45274**

2.9. State what the contract or lease is for and the nature of the debtor's interest _____

State the term remaining _____

List the contract number of any government contract _____

**Padco Financial Services, Inc.
1328 Main Street
Crete, IL 60417**

Debtor 1 **Katera's Kove, Inc.**

First Name

Middle Name

Last Name

Case number (if known) **16-23084****Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.10. State what the contract or lease is for and the nature of the debtor's interest **dishwashers and service**

State the term remaining **until 12/5/2019**

List the contract number of any government contract _____

**Timepayment Corporation
16 New England Executive Park, Suite 200
Burlington, MA 01803**

2.11. State what the contract or lease is for and the nature of the debtor's interest **lease**

State the term remaining **unknown**

List the contract number of any government contract _____

**Timepayment Corporation
16 New England Executive Park, Suite 200
Burlington, MA 01803**

Fill in this information to identify the case:Debtor name **Katera's Kove, Inc.**United States Bankruptcy Court for the: **WESTERN DISTRICT OF PENNSYLVANIA**Case number (if known) **16-23084**☐ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:*

- | | | | | |
|-------|--|--|--|---|
| 2.1 | Christian House Home Health, Inc. | 3801 Ohio River Boulevard
Baden, PA 15005 | RAW Consulting, LLC | <input type="checkbox"/> D _____
<input checked="" type="checkbox"/> E/F <u>3.32</u>
<input type="checkbox"/> G _____ |
| <hr/> | | | | |
| 2.2 | Katera's Kove Assisted Living Community | 599 Norwood Drive
Wampum, PA 16157 | The Home Savings And Loan Co. & ISAOA | <input checked="" type="checkbox"/> D <u>2.8</u>
<input type="checkbox"/> E/F _____
<input type="checkbox"/> G _____ |
| <hr/> | | | | |
| 2.3 | Lynn Marie and Michael Katekovich | 1701 Sampson Street
Conway, PA 15027 | The Home Savings And Loan Co. & ISAOA | <input checked="" type="checkbox"/> D <u>2.8</u>
<input type="checkbox"/> E/F _____
<input type="checkbox"/> G _____ |
| <hr/> | | | | |
| 2.4 | Lynn Marie and Michael Katekovich | 1701 Sampson Street
Conway, PA 15027 | Padco Financial Services, Inc. | <input checked="" type="checkbox"/> D <u>2.7</u>
<input type="checkbox"/> E/F _____
<input type="checkbox"/> G _____ |
| <hr/> | | | | |
| 2.5 | Lynn Marie and Michael Katekovich | 1701 Sampson Street
Conway, PA 15027 | Medical Staffing Associates, Inc. | <input type="checkbox"/> D _____
<input checked="" type="checkbox"/> E/F <u>3.27</u>
<input type="checkbox"/> G _____ |

Debtor **Katera's Kove, Inc.**Case number (if known) **16-23084****Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.6	Lynn Marie Katekovich	1701 Sampson Street Conway, PA 15027	Warren R. Butera	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.42</u> <input type="checkbox"/> G _____
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2.7	Lynn Marie Katekovich	1701 Sampson Street Conway, PA 15027	Laurel Linen Service Inc.	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.21</u> <input type="checkbox"/> G _____
-----	------------------------------	---	----------------------------------	---

2.8	Lynn Marie Katekovich	1701 Sampson Street Conway, PA 15027	PNC Bank	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.31</u> <input type="checkbox"/> G _____
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2.9	Lynn Marie Katekovich	1701 Sampson Street Conway, PA 15027	Sheetz Business Edge	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.35</u> <input type="checkbox"/> G _____
-----	------------------------------	---	-----------------------------	---

2.10	Lynn Marie Katekovich	1701 Sampson Street Conway, PA 15027	Staples	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.37</u> <input type="checkbox"/> G _____
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2.11	Lynn Marie Katekovich	1701 Sampson Street Conway, PA 15027	RAW Consulting, LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.32</u> <input type="checkbox"/> G _____
------	------------------------------	---	----------------------------	---

2.12	Lynn Marie Katekovich	1701 Sampson Street Conway, PA 15027	Can Capital	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.12</u> <input type="checkbox"/> G _____
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2.13	Medical Staffing Associates Inc.		Warren R. Butera	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.42</u> <input type="checkbox"/> G _____
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Debtor Katera's Kove, Inc. Case number (if known) 16-23084

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.14	United States Attorney's Office	Western District of Pennsylvania Joseph F. Weis, Jr. US Courthouse 700 Grant Street, Suite 4000 Pittsburgh, PA 15219	Internal Revenue Service	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>2.1</u> <input type="checkbox"/> G _____
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Fill in this information to identify the case:

Debtor name Katera's Kove, Inc.

United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA

Case number (if known) 16-23084

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply

Gross revenue
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:
From 1/01/2016 to Filing Date

☒ Operating a business
☐ Other _____

\$1,060,000.00

For prior year:
From 1/01/2015 to 12/31/2015

☒ Operating a business
☐ Other _____

\$1,963,000.00

For year before that:
From 1/01/2014 to 12/31/2014

☒ Operating a business
☐ Other _____

\$2,165,000.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

Debtor **Katera's Kove, Inc.**Case number (if known) **16-23084**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. The Home Savings And Loan Co. & ISAOA 3690 Orange Place, Suite 210 Beachwood, OH 44122	6/10/16, 7/10/16 and 8/10/16	\$41,736.36	<input checked="" type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___
3.2. Netlink Wireless 227 Old Farm Road Cranberry Twp 16066	6/9/16 and 7/29/16	\$52,000.00	<input type="checkbox"/> Secured debt <input checked="" type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___
3.3. Penn Power PO Box 3687 Akron, OH 44309	5/24/16 and 7/6/2016	\$7,538.21	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
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5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
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Debtor **Katera's Kove, Inc.**Case number (if known) **16-23084**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.	Warren R. Butera, Elizabeth Butera and Medical Staffing Associates Inc. v. Katera's Kove Inc. and Lynn M. Katekovich 2011-10548	Civil	Beaver County Court of Common Pleas 810 Third Street Beaver, PA 15009	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2.	Ruk Properties LLC v. Katera's Kove Inc. 2015-10334	Contract	Butler County Court of Common Pleas 124 West Diamond Street Butler, PA 16001	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.3.	Laurel Linen Service Inc. v. Katera's Kove Inc. and Lynn Katekovich 2014-10424	Contract	Beaver County Court of Common Pleas 810 Third Street Beaver, PA 15009	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.4.	PA Department of Labor & Industry v Katera's Kove Home Health Agency and Katera's Kove Person Care & Secured Dementia Community 2015-32996	Lien	PA Department of Labor & Industry 16th Fl., L&I Bldg. Harrisburg, PA 17121	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.5.	Ascentium Capital, LLC v. Katera's Kove, Inc. 20160901	Balances owed on installment sales of equipment	Harris County, Texas 210 Caroline Houston, TX 77002	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.6.	Balboa Capital Corp v. Katera's Kove, Inc. and Katera's Kove Homecare 30-2016-847809	collection of unpaid rental	Superior Court of CA, Orange County 751 West Santa Ana Boulevard Santa Ana, CA 09270-1000	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.7.	RAW Consulting, LLC f/k/a RAW Medical Consulting, LLC and Sayed M. Yossef v. Lynn Katekovich, Katera's Kove, Inc. and Christian House Home Health, Inc. f/k/a Katera's Home Health Agency, Inc. 11034-2016	Claims for repayments of loans and redemption of stock	Court of Common Pleas of Beaver Cty, PA 810 Third Street Beaver, PA 15009	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☒ None

Debtor **Katera's Kove, Inc.**Case number (if known) **16-23084**

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☐ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss <small>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</small>	Dates of loss	Value of property lost
motorola 2-way radios	\$0.00	2015-2016	\$30,000.00

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Robert W. Koehler, Attorney At Law Manor Complex, Penthouse 564 Forbes Avenue Pittsburgh, PA 15219	Attorney Fees	June 23, 2019	\$26,717.00

Email or website address
rkoehler@pghlaw.com

Who made the payment, if not debtor?

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Part 7: Previous Locations**14. Previous addresses**

Debtor **Katera's Kove, Inc.**Case number (if known) **16-23084**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address

Dates of occupancy
From-To**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services
the debtor providesIf debtor provides meals
and housing, number of
patients in debtor's care**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

- ☐ No.
- ☒ Yes. State the nature of the information collected and retained.

demographics, financial, health and family contacts

Does the debtor have a privacy policy about that information?

- ☐ No
- ☒ Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ NoneFinancial Institution name and
AddressLast 4 digits of
account numberType of account or
instrumentDate account was
closed, sold,
moved, or
transferredLast balance
before closing or
transfer

18.1. **PNC Bank**
730 Shenango Road
Beaver Falls, PA 15010

XXXX-9082

- ☒ Checking
- ☐ Savings
- ☐ Money Market
- ☐ Brokerage
- ☐ Other ___

Unknown

Debtor **Katera's Kove, Inc.**Case number (if known) **16-23084**

	Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.2.	PNC Bank 730 Shenango Road Beaver Falls, PA 15010	XXXX-8909	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	January, 2016	Unknown
18.3.	PNC Bank 730 Shenango Road Beaver Falls, PA 15010	XXXX-2319	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input checked="" type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	January, 2016	Unknown
18.4.	PNC Bank 730 Shenango Road Beaver Falls, PA 15010	XXXX-9453	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	January 5, 2016 the account was closed after \$1,500.00 was deposited to bring it to a \$0.00 balance	\$0.00
18.5.	Home Savings & Loan 275 West Federal Street Youngstown, OH 44503	XXXX-0030	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	December, 2015	Unknown
18.6.	Home Savings & Loan 275 West Federal Street Youngstown, OH 44503	XXXX-1604	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	December, 2015	Unknown
18.7.	Home Savings & Loan 275 West Federal Street Youngstown, OH 44503	XXXX-1612	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	On December 1, 2015 the account was closed with a negative balance of \$4.09 that was waived	\$0.00
18.8.	Home Savings & Loan 2634 Darlington Road Youngstown, OH 44503	XXXX-1620	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	October 31, 2015	\$19.75
18.9.	First National Bank 2634 Darlington Road Beaver Falls, PA 15010	XXXX-0186	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	October 16, 2015	Unknown

Debtor **Katera's Kove, Inc.**Case number (if known) **16-23084**

	Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.10	First National Bank 2634 Darlington Road Beaver Falls, PA 15010	XXXX-7184	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other __	October 16, 2015	Unknown
18.11	First National Bank 2634 Darlington Road Beaver Falls, PA 15010	XXXX-0187	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other __	October 16, 2015	Unknown
18.12	First National Bank 2634 Darlington Road Beaver Falls, PA 15010	XXXX-0189	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other __	October 16, 2015	Unknown
18.13	Huntington Bank 2552 Darlington Road Beaver Falls, PA 15010	XXXX-9541	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other __	Closed on April 1, 2016 and account balance was transferred to the account at Friendly Federal Credit Union	\$5,881.19
18.14	Friendly Federal Credit Union 384 State Street Baden, PA 15005	XXXX-5133	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other __	May 5, 2016 the account was closed after \$8.17 was deposited into it to bring it to a \$0.00 balance	\$0.00

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
---	--	-----------------------------	-----------------------

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
---------------------------	-----------------------------------	-----------------------------	-----------------------

Debtor **Katera's Kove, Inc.**Case number (if known) **16-23084**

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
Koppel Storage 2329 2nd Avenue Koppel, PA 16136	Lynn Katekovich, Ron Waddell, James Maccaglia, Tamm Mallary - 599 Norword Drive, Wampum, PA 16157	holiday decorations, cookware and utensils	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None

Owner's name and address	Location of the property	Describe the property	Value
Various residents 599 Norwood Drive Wampum, PA 16157	599 Norwood Drive Wampum, PA 16157	seasonal clothing and personal belongings of residents	Unknown

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	----------------------------------	--------------------	----------------

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	------------------------------------	-----------------------------	----------------

Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case.

Debtor **Katera's Kove, Inc.**Case number (if known) **16-23084**

Include this information even if already listed in the Schedules.

☒ None**Business name address****Describe the nature of the business****Employer Identification number**

Do not include Social Security number or ITIN.

Dates business existed**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None**Name and address****Date of service
From-To**26a.1. **Kacey Pournaras
213 Virginia Avenue
Beaver, PA 15009****last two years**26a.2. **James Maccaglia
227 Old Farm Road
Cranberry Twp, PA 16066****10/2015 to the
present**

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None**Name and address****If any books of account and records are
unavailable, explain why**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None**Name and address**26d.1. **Ascentium Capital
PO Box 304593
Dallas, TX 75303-1593**26d.2. **Balboa Capital
2010 Main Street
Irvine, CA 92614**26d.3. **Lease Corporation of America
PO Box 1297
Troy, MI 48099-1297**26d.4. **Timepayment Corporation
16 New England Executive Park, Suite 200
Burlington, MA 01803**26d.5. **Great American Leasing
PO Box 660831
Dallas, TX 75266-0831**26d.6. **Alliance Laundry Systems, LLC
PO Box 20381
Dallas, TX 75320**

Debtor **Katera's Kove, Inc.**Case number (if known) **16-23084****Name and address**

26d.7. **Marlin- 1, 2, 3 & 4**
PO Box 13604
Philadelphia, PA 19101-3604

26d.8. **Padco Financial Services, Inc.**
1328 Main Street
Crete, IL 60417

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

- ☒ No
- ☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
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28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Lynn Katekovich	1701 Sampson Street Conway, PA 15027	CEO/President	55% held with her husband, Michael Katekovich
Kacey Pournaras	213 Virginia Drive Beaver, PA 15009	Secretary	
Adam Pournaras	213 Virginia Drive Beaver, PA 15009		17%
Krista Pournaras	1621 Sampson Street Conway, PA 15027		17%
RAW Consulting, LLC	415 40th Street Beaver Falls, PA 15010	shareholder	9%
Syed M. Yoseff	3304 Stones Throw Avenue Youngstown, OH 44514	shareholder	2%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No
- ☐ Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses,

Debtor Katera's Kove, Inc.Case number (if known) 16-23084

loans, credits on loans, stock redemptions, and options exercised?

- ☒ No
☐ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
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31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on September 2, 2016

/s/ Lynn Katekovich
Signature of individual signing on behalf of the debtor

Lynn Katekovich
Printed name

Position or relationship to debtor CEO/PresidentAre additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No
☐ Yes

B2030 (Form 2030) (12/15)

**United States Bankruptcy Court
Western District of Pennsylvania**

In re **Katera's Kove, Inc.**

Debtor(s)

Case No. **16-23084**

Chapter **11**

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	25,000.00
Prior to the filing of this statement I have received	\$	25,000.00
Balance Due	\$	0.00

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

September 2, 2016

Date

/s/ Robert Winfield Koehler

Robert Winfield Koehler 32780

Signature of Attorney

Robert W. Koehler, Attorney At Law

Manor Complex, Penthouse

564 Forbes Avenue

Pittsburgh, PA 15219

412 281-5336 Fax: 412 281-3537

rkoehler@pghlaw.com

Name of law firm

United States Bankruptcy Court
Western District of Pennsylvania

In re **Katera's Kove, Inc.**

Debtor(s)

Case No. **16-23084**

Chapter **11**

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Adam Pournaras 213 Virginia Drive Beaver, PA 15009		160 (16%)	Shareholder
Krista Pournaras 1621 Sampson Street Conway, PA 15027		160 (16%)	Shareholder
Lynn and Michael Katekovich 1701 Sampson Street Conway, PA 15027		550 (55%)	Shareholders
RAW Consulting, LLC f/k/a RAW Medical Consulting, LLC 415 40th Street Beaver Falls, PA 15010		110 shares (11%)	Shareholder
Syed M. Yossef 3304 Stones Throw Avenue Youngstown, OH 44514		20 (2%)	Shareholder

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **CEO/President** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **September 2, 2016**

Signature **/s/ Lynn Katekovich**
Lynn Katekovich

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.*

**United States Bankruptcy Court
Western District of Pennsylvania**

In re	<u>Katera's Kove, Inc.</u>	Case No.	<u>16-23084</u>
	Debtor(s)	Chapter	<u>11</u>

VERIFICATION OF CREDITOR MATRIX

I, the CEO/President of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date:	<u>September 2, 2016</u>	<u>/s/ Lynn Katekovich</u>
		Lynn Katekovich/CEO/President
		Signer/Title